



SS. PETER AND PAUL CATHOLIC CHURCH, MANKATO
REGISTRATION | CODE OF CONDUCT



STUDENT REGISTRATION
UNDER 18 YEARS OLD

Event: March for Life, Washington D.C. and IVE Youth Festival **Dates:** January 20-24, 2022
Location: Washington D.C **Transportation:** Mini Vans- Airplane
Parish: Ss. Peter and Paul, Mankato **Group Leader:** Sr. Strength of Martyrs
Cost of Event: \$350 **Registration and \$250 down payment [for plane ticket] due Oct 23, 2021**

Name: _____ **Gender:** Male | Female **DOB:** __/__/__
Address: _____ city/state/zip _____
Home Phone: _____ **Cell:** _____ **Email:** _____
Parent/Guardian Name: _____
Parent/Guardian Home Phone: _____ **Work:** _____ **Cell:** _____

PARENTAL CONSENT | LIABILITY | IMAGE WAIVER

I, (Parent or Guardian's name) _____ grant permission for (child's name) _____ to participate in the above named activity and I warrant that my child is in good health. In consideration of my child's participation, I agree to indemnify the above named Parish/Religious Order from any claims or law suits brought against the above named Parish/Religious Order by myself, my child or others, that arises out of any behavior by my child at the event described above. I also agree to pay reasonable attorney's fees or expenses incurred by the Parish/Religious Order in defense of such a claim/suit. I understand that the hotels stayed at may have swimming pools and I give permission for my child to use the pool.
IMAGE WAIVER: The undersigned parent/guardian hereby consents that the Parish of Ss. Peter and Paul be permitted to use and publish for advertising, commercial or publicity purposes the likeness (picture) of my child for lawful purpose and the undersigned parent guardian does hereby release the Parish of Ss. Peter and Paul from any liability in connection with such use.

EMERGENCY MEDICAL TREATMENT: In the event of an emergency, I give permission to transport my child to a hospital for medical treatment. I wish to be advised prior to any further treatment by a doctor or hospital.

EMERGENCY CONTACT: In the event of any emergency. If unable to reach me at the above numbers, contact

Alternative contact name (printed) _____ Relationship _____ Home Phone _____

MEDICATIONS: My child may bring medications necessary, and such medications will be well-labeled and in original containers. Names of medications and concise directions for seeing that the child takes such medications, including dosage and frequency of dosage are as follows: _____

FAMILY HEALTH PLAN CARRIER _____
FAMILY DOCTOR _____ **CLINIC** _____ **PHONE NUMBER** _____

SIGN HERE As Parent or Guardian, I agree to all of the above stated considerations and conditions.
Signature _____ Date _____

OPTIONAL MEDICAL INFORMATION: Specific Medical Information the Parish of Ss. Peter and Paul will take reasonable care to see that the following information will be held in confidence.

- Allergic reactions (medications, foods, gluten intolerance, plants, insects, etc) _____
- Does your child have a medically prescribed diet? _____
- Any physical limitations? _____

I grant permission for non-prescription meds (ibuprofen, cough syrup etc) to be given to my child if necessary
Parent Signature _____ Date _____



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UNDER 18 YEARS OLD

MARCH FOR LIFE, WASHINGTON D.C. | JAN 20-24, 2022

Name: _____

Parish: _____

CODE OF CONDUCT

Please remember you are representatives of Ss. Peter and Paul Parish. We expect you will represent our Parish and Diocese well during this pilgrimage. Recall that you are a witness to Christ Jesus, to the press, and others who will attend this gathering. We ask you to project an image of Christian charity and respect to everyone and to the property around you. We are confident you will display maturity, responsibility in leadership and character. Thank you!

Parish participants are responsible for their actions. Each participant accepts the full responsibility for any damage or theft caused while attending this pilgrimage. Leaders/Chaperones are expected to enforce the Code of Conduct and set an example for the participants.

1. I will treat all persons with as a son or daughter of God with dignity and respect. I will not intentionally cause any harm (physically, emotionally, or spiritually) to any person in any way.
2. I will respect the property of others, including all program facilities
3. I will follow all appropriate instructions of all personnel aiding in this event; including, but not limited to chaperones, support staff, transportation personnel and administration.
4. I will be on time for all check ins and departure times
5. I will attend all activities and remain with their group or designated subgroup at all times.
6. I will not purchase, possess or use alcohol or illegal drugs or tobacco products
If you have prescription medication, your group leader must be informed before the trip
7. I will not purchase, possess or view sexually explicit or morally inappropriate materials in any form
8. I will not purchase or possess any weapons. Possession of a weapon will mean immediate dismissal
9. I will be aware of noise levels in sleeping areas. I will respect others' need for sleep, quiet time and privacy.
10. I will dress modestly at all times.

I agree to abide by this code of conduct traveling to and from and during this event. I understand that failure to abide by this code may result in my being sent home at my own and/or my parents expense.

Participant Signature _____ Date _____

Parent Signature _____ Date _____

Group Leader Signature _____ Date _____